

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/791,430
	Filing Date	03/01/2004
	First Named Inventor	Magnuson, Thomas
	Art Unit	3724
	Examiner Name	Alie, Ghassem
	Attorney Docket Number	00098-00219

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

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Customer Number: 000070130

OR

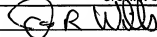
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	James R. Wills		
Date	1/28/08		Telephone 530-898-8153

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 3 forms are submitted.

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SIGNATURE of Applicant or Assignee of Record

Signature

Name

Thomas R. Magnuson

Date

1/28/08

Telephone

530-898-8153

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SIGNATURE of Applicant or Assignee of Record	
Signature	
Name	Jess R. Wills
Date	1/26/08
Telephone	530-514-2892
<small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small>	
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